

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|---------|---------|
| FEE DETERMINATION | DB | 102003 | 9-30-08 |
| O.I.P.E. CLASSIFIER | | 74-9-05 | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 64694 | 5-25 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|-------------------|
| Final Original | 06 03 21 03 02 03 |
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| Claim | Date |
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| Final Original | 06 03 03 12 02 03 |
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| Claim | Date |
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| Final Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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